

Summary of Investigation Results Lecanemab (genetical recombination)

Non-proprietary name	Non-proprietary name	Brand name (marketing authorization holder)
Brand name	Lecanemab (genetical recombination)	Leqembi for Intravenous Infusion 200mg, 500mg (Eisai Co., Ltd.)
Japanese market launch	December 2023	
Indications	Slowing the progression of mild cognitive impairment and mild dementia due to Alzheimer's disease	
Summary of revisions	<ol style="list-style-type: none"> 1. In the "8. IMPORTANT PRECAUTIONS" section, descriptions to the following effect should be added as precautions concerning the occurrence of amyloid related imaging abnormalities (ARIA): Patients and their families/caregivers should be instructed to seek immediate medical attention if a patient experiences symptoms suggestive of ARIA, irrespective of the treatment duration, and in this case, clinical evaluation should be promptly performed, including an MRI if ARIA is suspected. 2. The following descriptions should be added to the "8. IMPORTANT PRECAUTIONS" section as recommendations regarding the frequency of MRI scanning for patients with no symptoms suggestive of ARIA (prior to the 5th, 7th, and 14th doses and periodically thereafter): <ul style="list-style-type: none"> • It is advisable to perform MRI scanning prior to the 3rd dose. • Especially for patients who need to be carefully monitored for the occurrence of ARIA, performing MRI scanning prior to the 3rd dose should be considered. 	
Investigation results and background of the revision	<p>Adverse reaction reports, post-marketing surveillance, and overseas prescribing information were investigated. As a result of consultation with expert advisors, the MHLW/PMDA concluded that revision of PRECAUTIONS was necessary for the following reasons:</p> <ul style="list-style-type: none"> • Some cases of symptomatic ARIA for which it took a long time from the onset of the symptoms to MRI scanning have been reported. Therefore, it is considered important to instruct patients and their families/caregivers to seek immediate medical attention if a patient experiences ARIA-related symptoms, irrespective of the treatment duration and, in this case, to promptly perform clinical evaluation, including MRI scanning if ARIA is suspected. • Some cases of serious ARIA (ARIA-E, ARIA-H) that occurred before 	

	<p>the 5th dose have been reported, and serious ARIA that occurred before the 4th dose was mostly symptomatic ARIA. Therefore, it is considered advisable to perform MRI scanning prior to the 3rd dose in order to achieve early detection of ARIA during the asymptomatic stage.</p> <ul style="list-style-type: none"> In light of factors such as patient backgrounds of patients who experienced serious ARIA before the 5th dose, it is considered important to consider performing MRI scanning prior to the 3rd dose, especially for patients who need to be carefully monitored. 	
<p>Reference: Number of cases*¹ involving ARIA- related symptoms reported in Japan and overseas</p>	<p>In Japan*²</p> <p>A total of 36 cases have been reported to date.</p> <p>No deaths have been reported to date.</p>	<p>Overseas*³</p> <p>A total of 5 cases have been reported to date.</p> <p>A total of 5 deaths have been reported to date.</p>

*1: Cases collected in the PMDA's safety database for drugs.

*2: Cases corresponding to (1) and (2) below. Causality assessment was not performed.

(1) Cases falling under any of MedDRA ver. 28.0 PTs "amyloid related imaging abnormalities," "amyloid related imaging abnormality-oedema/effusion," "brain oedema," "vasogenic cerebral oedema," "amyloid related imaging abnormality-microhaemorrhages and haemosiderin deposits," "cerebellar microhaemorrhage," "cerebral haemorrhage," "haemorrhage intracranial," "thalamus haemorrhage," "superficial siderosis of central nervous system," "cerebral microhaemorrhage," and "brain stem haemorrhage".

(2) The total number of doses of this drug was less than 5 as of the onset date of ARIA.

*3: Cases triggered the revision of the US labeling (change in the frequency of MRI monitoring). Causality assessment was not performed. The expert advisors present at the Expert Discussion regarding the current investigation were nominated based on their conflict of interest declarations concerning the relevant products, pursuant to the "Rules for Convening Expert Discussions, etc., by the Pharmaceuticals and Medical Devices Agency" (PMDA Administrative Rule No. 20-8, dated December 25, 2008).